

**FEE TRANSMITTAL
for FY 2003**

Patent fees are subject to annual revision.

Compleat if Kn wn

Application Number	09/694,519
Confirmation Number	9641
Filing Date	10/23/2000
First Named Inventor	Robert J. Isfort
Examiner Name	Teresa E. Strzelecka
Group/Art Unit	1637
Attorney Docket No.	8311

TECH CENTER 1600/2100

SEP 02 2003

RECEIVED

TOTAL AMOUNT OF PAYMENT (\$590.00)

METHOD OF PAYMENT (check one)

- 1.
- ☒
- The Commissioner is hereby authorized to charge indicated fees and credit any over payments to:

Deposit Account Number 16-2480

Deposit Account Name The Procter & Gamble Company

- ☒
- Charge Any Additional Fee Required Under status. 37 C.F.R. §§1.16 and 1.17

FEE CALCULATION (continued)**3. ADDITIONAL FEES**

Code	(\$)	Fee Description	Fee Paid
1051	130	Surcharge-late filing fee or oath	<input type="checkbox"/>
1052	50	Surcharge-late provisional filing fee or cover sheet	<input type="checkbox"/>
1053	130	Non-English specification	<input type="checkbox"/>
1812	2,520	For filing a request for <i>ex parte</i> reexamination	<input type="checkbox"/>
1804	920*	Requesting publication of SIR prior to Examiner's action	<input type="checkbox"/>
1805	1,840*	Requesting publication of SIR after Examiner's action	<input type="checkbox"/>
1251	110	Extension for reply within 1 st month	<input type="checkbox"/>
1252	410	Extension for reply within 2 nd month	<input checked="" type="checkbox"/>
1253	930	Extension for reply within 3 rd month	<input type="checkbox"/>
1254	1,450	Extension for reply within 4 th month	<input type="checkbox"/>
1255	1,970	Extension for reply within 5 th month	<input type="checkbox"/>
1401	320	Notice of Appeal	<input type="checkbox"/>
1402	320	Filing a brief in support of an appeal	<input type="checkbox"/>
1403	280	Request for oral hearing	<input type="checkbox"/>
1451	1,510	Petition to institute a public use proceeding	<input type="checkbox"/>
1452	110	Petition to revive - unavoidable	<input type="checkbox"/>
1453	1,300	Petition to revive - unintentional	<input type="checkbox"/>
1501	1,300	Utility issue fee (or reissue)	<input type="checkbox"/>
1502	470	Design issue fee	<input type="checkbox"/>
1460	130	Petitions to the Commissioner	<input type="checkbox"/>
1807	50	Petitions related to provisional applications (37 C.F.R. 1.17(q))	<input type="checkbox"/>
1806	180	Submission of Information Disclosure Statement	<input checked="" type="checkbox"/>
1809	750	Filing a submission after final rejection (37 CFR § 1.129(a))	<input type="checkbox"/>
1810	750	For each additional invention to be examined (37 CFR §1.129(b))	<input type="checkbox"/>
1801	750	Request for Continued Examination (RCE)	<input type="checkbox"/>
1802	900	Request for expedited examination of a design application	<input type="checkbox"/>
1454	1300	Acceptance of unintentionally delayed claim for priority under 35 U.S.C. 119, 120, 121, or 365 (a) or (c)	<input type="checkbox"/>
Other fee (specify) _____			<input type="checkbox"/>
Other fee (specify) _____			<input type="checkbox"/>

FEE CALCULATION**1. BASIC FILING FEE - Large Entity**

Code	(\$)	Fee Description	Fee Paid
1001	750	Utility filing fee	<input type="checkbox"/>
1002	330	Design filing fee	<input type="checkbox"/>
1004	750	Reissue filing fee	<input type="checkbox"/>
1005	160	Provisional filing fee	<input type="checkbox"/>

SUBTOTAL (1) (\$)☐**2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE - Large Entity**

Total Claims	Extra Claims	Fee from Below	Fee Paid
<input type="checkbox"/> - 20** =	<input type="checkbox"/> x	<input type="checkbox"/>	= <input type="checkbox"/>

Independent Claims ☐ - 3** = ☐ x ☐ = ☐Multiple Dependent ☐ = ☐

** or number previously paid, if greater; For Reissues, see below

Code	(\$)	Fee Description
1202	18	Claims in excess of 20
1201	84	Independent claims in excess of 3
1203	280	Multiple dependent claim, if not paid
1204	84	**Reissue independent claims over original patent
1205	18	**Reissue claims in excess of 20 & over original patent

SUBTOTAL (2) (\$)☐

* Reduced by Basic Filing Fee Paid SUBTOTAL(3) (\$) [590.00]

SUBMITTED BY

Name (Print/Type) Naishadh N. Desai

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Complete (if applicable)

Telephone (513) 622-0087

Signature

Date

August 25, 2003

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